



# Department of Defense INSTRUCTION

NUMBER 6025.16

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ASD(HA)

SUBJECT: Portability of State Licensure for Health Care Professionals

- References:
- (a) Section 1094(d) of title 10, United States Code
  - (b) Section 1096 of title 10, United States Code
  - (c) [DoD Directive 6025.13](#), "Clinical Quality Management Program (CQMP) in the Military Health Services System (MHSS)," July 20, 1995
  - (d) Section 1094a of title 10, United States Code
  - (e) Section 1102 of title 10, United States Code

## 1. PURPOSE

This Instruction implements policy and establishes procedures under Title 10 U.S.C. 1094(d) (reference (a)) to permit licensed physicians and other healthcare professionals of the Military Health System (MHS) who are members of the Armed Forces to perform authorized duties for the Department of Defense in any authorized location.

## 2. APPLICABILITY

This Instruction applies to the Office of the Secretary of Defense, the Military Departments, the Chairman of the Joint Chiefs of Staff, the Combatant Commands, the Inspector General of the Department of Defense, the Defense Agencies, the DoD Field Activities and all other organizational entities within The Department of Defense (hereafter referred to collectively as "the DoD Components").

### 3. DEFINITIONS

3.1. Approved Post-Graduate Training. Postgraduate training program accredited by the Accreditation Council on Graduate Medical Education or the American Osteopathic Association, or other similar entities regulating healthcare professional training programs.

3.2. Healthcare Practitioner. Synonymous with "healthcare professional." It means any physician, dentist, or healthcare practitioner of one of the professions whose members are required to possess a professional license or other similar authorization. These include DoD healthcare personnel who are physicians, dentists, registered nurses, practical nurses, physical therapists, podiatrists, optometrists, clinical dieticians, social workers, clinical pharmacists, clinical psychologists, occupational therapists, audiologists, speech pathologists, physician assistants, or any other person providing direct patient care as may be designated by the Assistant Secretary of Defense (Health Affairs) (ASD(HA)).

3.3. Host State. The State in which off-base duties will be carried out.

3.4. MHS Official Responsible. The Surgeon General, TRICARE Lead Agent, Military Treatment Facility (MTF) Commander, or other official authorized by the Assistant Secretary of Defense (Health Affairs) who makes the off-base duty assignment of the healthcare professional involved.

3.5. Off-Base Duties. Officially assigned professional duties performed at an authorized location outside a military medical treatment facility and any military installation. Off-base duties include, but are not limited to, training or skill maintenance duties in non-DoD healthcare facilities, professional activities performed under the authority of the military-civilian health services partnership program under reference (b), and telemedicine services involving a patient outside an MTF and any military installation. Off-base duties do not include participation in approved post-graduate training of physicians.

3.6. State. Any of the 50 States, the District of Columbia, or a commonwealth, territory, or possession of the United States.

3.7. State Licensing Board. The entity or entities authorized under the applicable State law to issue licenses or other authorizing document such as certificate or registration to healthcare professionals.

#### 4. POLICY

It is DoD policy:

4.1. That as directed by Title 10 U.S.C. 1094(d) (reference (a)), notwithstanding any State law regarding the licensure of healthcare professionals, a licensed healthcare professional who is a member of the Armed Forces may practice the member's profession in any State, regardless of whether the practice occurs in a healthcare facility of the Department of Defense, a civilian facility affiliated with the Department of Defense, or any other authorized location as long as the individual is practicing within the scope of Federal duties.

4.2. That the Military Departments and MHS officials responsible shall, prior to assigning licensed providers to off-base duties, follow the procedures established in this Instruction to promote cooperation and good will with State licensing boards.

#### 5. RESPONSIBILITIES

5.1. The Assistant Secretary of Defense (Health Affairs), under the Under Secretary of Defense (Personnel and Readiness) :

5.1.1. Shall monitor compliance with this Instruction, and may issue supplemental guidance, as appropriate.

5.1.2. May grant exceptions to the Instruction, to the extent authorized by law.

5.2. The Secretaries of the Military Departments under the authority of reference (c), shall implement this Instruction.

5.3. The Director, TRICARE Management Activity, under the Assistant Secretary of Defense for Health Affairs shall provide coordination and assistance to the Military Departments and the ASD(HA) in implementation of this Instruction.

#### 6. PROCEDURES

6.1. Qualifications. To be eligible for assignment of off-base duties, the healthcare professional shall have the following qualifications:

6.1.1. The healthcare professional shall have a current, valid, and

unrestricted license or other authorizing document such as certificate or registration, consistent with the requirements of reference (c), which encompasses the professional activities involved in the off-base duty assignment.

6.1.2. A healthcare professional will not be assigned to off-base duties if there is an unresolved allegation which, if substantiated, would result in an adverse licensing or privileging action.

6.1.3. The healthcare professional shall have current clinical competence to perform the professional duties assigned.

6.1.4. In the case of physicians and other privileged providers, the healthcare professional shall have current clinical privileges granted and maintained in accordance with reference (c), which encompass the professional duties assigned. Alternatively, if such duties are outside the scope of clinical privileges granted by the applicable privileging authority, the provider shall have clinical competence sufficient for such privileges.

6.1.5. In the case of physicians, the following additional qualification requirements apply:

6.1.5.1. The physician shall have completed at least three years of approved post-graduate training (including completion of PGY-3) or have achieved American Board of Medical Specialties (ABMS) or American Osteopathic Association (AOA) specialty board certification.

6.1.5.2. The physician shall have maintained current competence, in that if ten years or more have passed since completion of the licensing examination, the physician must have ABMS/AOA specialty board certification.

6.1.5.3. The physician shall be current with applicable continuing medical education requirements under the system established pursuant to Title 10 U.S.C. 1094a (reference (d)).

6.1.6. In all cases in which the off-base duty will be performed in a non-DoD healthcare facility, the healthcare professional shall follow the rules and by-laws of such facility, to the extent they are applicable to the professional.

## 6.2. Coordination With State Licensing Boards

6.2.1. Prior to a healthcare professional performing off-base duties under the

authority of Title 10 U.S.C. 1094(d) (reference (a)), the MHS official responsible shall notify the applicable licensing board of the host State of the duty assignment involved. Such notification shall include the name of the healthcare professional; the healthcare professional's State(s) of licensure; the location and expected duration of the off-base duty assignment; the scope of duties; the healthcare professional's commanding officer; and the MHS liaison official for the licensing board to contact with any questions or issues concerning the off-base duty assignment. The notification will also reference Title 10 U.S.C. 1094(d) (reference (a)) and this Instruction as underlying authority and include a statement that the healthcare professional meets all qualification standards of paragraph 6.1.

6.2.2. In cases in which the off-base duties involve the provision of healthcare services through telemedicine from an MTF and patients outside military treatment facilities, paragraph 6.2.1. shall not be applicable.

6.2.3. The requirement of paragraph 6.2.1. may, on a case-by-case basis, be waived by the MHS official responsible with respect to off-base duties of non-physicians if the MHS official responsible determines that such requirement is not necessary in that case to promote cooperation and good will with the State licensing board concerned and such waiver is consistent with this Instruction and guidance of the ASD(HA).

6.3. Investigations and Reports. In the event of any allegation of misconduct on the part of the military healthcare professional arising from the healthcare professional's performance of the off-base duty assignment, the following requirements apply:

6.3.1. MHS personnel shall, to the extent allowed by law, cooperate with authorized officials, if any, investigating the allegation on behalf of the host State licensing board, any other licensing board which has granted a license to the healthcare professional involved, and the non-DoD healthcare facility at which the military healthcare professional was performing the off-base duty assignment. Cooperation may include providing testimony and assisting in gathering evidence.

6.3.2. Upon the referral by a State licensing board or authorized official of the non-DoD healthcare facility involved of such an allegation of misconduct to the MHS official responsible or designated MHS liaison official, or upon receipt of such an allegation from the person or entity making the allegation, or upon otherwise learning of such an allegation, the MHS official responsible shall ensure that the allegation is reviewed and, if it raises a substantive issue of misconduct, investigated.

6.3.2.1. In the case of a privileged provider, if the results of the investigation indicate that the clinical privileges of the military provider should be revoked or limited by the MHS privileging authority, such action shall be taken in accordance with applicable due process procedures. Adverse privileging actions shall be reported to the National Practitioner Data Bank and the Federation of State Medical Boards and/or other appropriate authorities in accordance with applicable requirements.

6.3.2.2. In the case of a healthcare professional other than a privileged provider, if the results of the investigation indicate that an action should be taken to revoke or restrict the authorized clinical activities of the healthcare professional, such action shall be taken in accordance with applicable due process procedures and shall be reported in accordance with applicable reporting requirements.

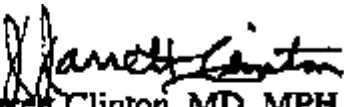
6.3.2.3. If requested by the host State licensing board or other appropriate State licensing board or by an authorized official of the non-DoD healthcare facility at which the off-base duty assignment was performed, the full results of the MHS investigation shall be provided to such board or authorized official as an exception to the general rule of confidentiality of medical quality assurance records under the authority of subsection Title 10 U.S.C. 1102(c)(1)(C) or (D) (reference (e)). The provision of such results shall, however, be contingent upon the recipient agreeing to maintain the confidentiality of such medical quality assurance records in accordance with Title 10 U.S.C. 1102 (reference (e)).

6.3.3. If the non-DoD facility at which the off-base duty was being performed withdraws approval for the military healthcare professional to continue to perform such duty, the off-base duty assignment shall be terminated. If the host State licensing board requests that the off-base duty assignment be terminated, it shall be terminated, unless the Assistant Secretary of Defense (Health Affairs) determines that such request is arbitrary or without foundation.

6.4. Supplemental Agreements. MHS officials responsible are authorized to enter into memoranda of agreement or other appropriate arrangements consistent with this Instruction and other applicable law and DoD issuances to facilitate accomplishment of the purposes of this Instruction.

7. EFFECTIVE DATE

This Instruction is effective immediately.

  
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Acting Assistant Secretary of Defense  
(Health Affairs)